PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number 106/1359

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
<u> </u>			(Column 1)		(Colu	(Column 2)		TYPE				ENTITY	
TOTAL CLAIMS			2c			*	F		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*	Φ		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 m	inus 3 =	*	φ		X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	······				+140=		OR	+280=		
.* If	the difference	in column 1 is	ero, enter	"0" in c	olumn 2		TOTAL	·	OR	TOTAL	150		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column							OTHER THAN						
_		(Colum			(Column 3).	SMALL			OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=	-	OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							+140=		OR	+280=		
								TOTAL			TOTAL		
									· 	OR	ADDIT. FEE		
_		(Column 1)		(Colur		(Column 3)	٠.						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, 7	
	Independent	*	Minus	***	CLAINA	=		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	1 h	X42= .	-		V04-		
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		CLAIM		^42=			OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
**	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er fou	ind in the apr	oropriate bo	x in col	lumo 1.		